Retail Food Inspection Report

Floyd County Health Department Telephone (812) 948-4726

Establishment Name FISTFUL OF TACOS (MOBILE #2) Address 2798 PAOLI PIKE (SUITE H), NEW ALBANY IN 47150						Telephone Number 812-557-0226 (812) 207-3474	Date of Inspection 10/01/2020	ID#
Owner DERECK WASHBURN						Purpose X Routine	Follow Up	Released 10/01/2020
Owner's Address 2798 PAOLI PIKE (SUITE H) NEW ALBANY, IN 47150-						—Follow-up Complaint		
Person in Charge BRENT WASHBURN						Pre-Operational	M. T	
Responsible Person's Email DERECK@FISTFULOFTACOS.COM						Temporary HACCP	Menu Type 1 2 3	4 <u>X</u> 5 _
Certified Food Handler DERECK WASHBURN						Other (list)		
CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C" VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRAIVE COLUMN MARKED AS "R"								
Section #	ion # C NC R Narrative To Be Corrected							
438 X 177 342 X	X X		Observed water Observed genera	cal spray bottle lacking of bottles stored on truck fl ator not hooked up (using amp was inoperable.	oor.	on name label. ane for flat top), meaning	TODAY TODAY CORRE	CTED
Summary of Violations C 1 NC 2 R 0								
Received by (name and title printed):						Inspected by (name and title printed): A.J. Ingram CHIEF FOOD SPECIALIST		
Received by (signature):						Inspected by (signature):		
cc:				cc:	-		cc:	